

SIGNET HEALTH/REHAB CENTER OF PRESCOTT

1505 ORRIN ROAD

PRESCOTT

54021

Phone: (715) 262-5661

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/03): 65

Total Licensed Bed Capacity (12/31/03): 65

Number of Residents on 12/31/03: 53

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 44

Corporation

Skilled

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		26.4
Supp. Home Care-Personal Care	No					1 - 4 Years		35.8
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	7.5	More Than 4 Years		18.9
Day Services	No	Mental Illness (Org./Psy)	18.9	65 - 74	5.7			----
Respite Care	No	Mental Illness (Other)	0.0	75 - 84	26.4			81.1
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	39.6	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	20.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.9		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	3.8	65 & Over	92.5	-----		
Transportation	No	Cerebrovascular	15.1	-----		RNs		5.7
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		10.4
Other Services	Yes	Respiratory	1.9	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	58.5	Male	34.0	Aides, & Orderlies		
Mentally Ill	No		----	Female	66.0			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	3	42.9	395	3	10.0	151	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	6	11.3
Skilled Care	4	57.1	325	27	90.0	128	0	0.0	0	16	100.0	143	0	0.0	0	0	0.0	47	88.7
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	7	100.0		30	100.0		0	0.0		16	100.0		0	0.0		0	0.0	53	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
		-----			-----	
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	4.5	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	19.4	Bathing	1.9	88.7	9.4	53
Other Nursing Homes	10.4	Dressing	9.4	81.1	9.4	53
Acute Care Hospitals	65.7	Transferring	15.1	69.8	15.1	53
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	22.6	64.2	13.2	53
Rehabilitation Hospitals	0.0	Eating	69.8	18.9	11.3	53
Other Locations	0.0	*****				
Total Number of Admissions	67	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	5.7	Receiving Respiratory Care		13.2
Private Home/No Home Health	27.8	Occ/Freq. Incontinent of Bladder	64.2	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	27.8	Occ/Freq. Incontinent of Bowel	34.0	Receiving Suctioning		0.0
Other Nursing Homes	5.6			Receiving Ostomy Care		5.7
Acute Care Hospitals	22.2	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	3.8	Receiving Mechanically Altered Diets		32.1
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	16.7	With Pressure Sores	15.1	Have Advance Directives		100.0
Total Number of Discharges		With Rashes	5.7	Medications		
(Including Deaths)	54			Receiving Psychoactive Drugs		54.7

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	67.7	86.2	0.79	87.1	0.78	88.1	0.77	87.4	0.77
Current Residents from In-County	67.9	78.5	0.87	81.0	0.84	82.1	0.83	76.7	0.89
Admissions from In-County, Still Residing	26.9	17.5	1.53	19.8	1.36	20.1	1.34	19.6	1.37
Admissions/Average Daily Census	152.3	195.4	0.78	158.0	0.96	155.7	0.98	141.3	1.08
Discharges/Average Daily Census	122.7	193.0	0.64	157.4	0.78	155.1	0.79	142.5	0.86
Discharges To Private Residence/Average Daily Census	68.2	87.0	0.78	74.2	0.92	68.7	0.99	61.6	1.11
Residents Receiving Skilled Care	100	94.4	1.06	94.6	1.06	94.0	1.06	88.1	1.14
Residents Aged 65 and Older	92.5	92.3	1.00	94.7	0.98	92.0	1.01	87.8	1.05
Title 19 (Medicaid) Funded Residents	56.6	60.6	0.93	57.2	0.99	61.7	0.92	65.9	0.86
Private Pay Funded Residents	30.2	20.9	1.44	28.5	1.06	23.7	1.27	21.0	1.44
Developmentally Disabled Residents	0.0	0.8	0.00	1.3	0.00	1.1	0.00	6.5	0.00
Mentally Ill Residents	18.9	28.7	0.66	33.8	0.56	35.8	0.53	33.6	0.56
General Medical Service Residents	58.5	24.5	2.39	21.6	2.71	23.1	2.53	20.6	2.85
Impaired ADL (Mean)	44.5	49.1	0.91	48.5	0.92	49.5	0.90	49.4	0.90
Psychological Problems	54.7	54.2	1.01	57.1	0.96	58.2	0.94	57.4	0.95
Nursing Care Required (Mean)	9.0	6.8	1.32	6.7	1.34	6.9	1.30	7.3	1.22